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**POWER OF ATTORNEY
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INDICATION FORM**

Application Number	10/508,781
Filing Date	September 23, 2004
First Named Inventor	Tai-Tung YIP
Title	Serum Biomarkers in Hepatocellular
Art Unit	None Yet Assigned
Examiner Name	None Yet Assigned
Attorney Docket Number	035394-0265

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

22428

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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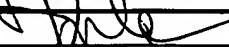
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I am the:

Applicant/Inventor.

a 50%
Assignee of record of ~~the entire~~ interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	29 June 2005
Name	Ms. Ngan Alice Man Wai	Telephone	(852)2609-8883
Title and Company	Director, Research and Technology Administration Office		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of two (2) forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

19 SEP 2005

PTO/SB/81 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035

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SIGNATURE of Applicant or Assignee of Record

Signature

Date

11/21/05

Name

John Storella

Telephone

510-505-2100

Title and Company

Vice President, Ciphergen Biosystems, Inc.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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